

08-30-06

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/575,749
	Filing Date	April 12, 2006
	First Named Inventor	Germano Emiliani
	Art Unit	N/A
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	05581-00145-US

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):  Declaration Recordation of Assignment Return Receipt Postcard
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	CONNOLLY BOVE LODGE & HUTZ LLP		
Signature			
Printed name	Stephanie O'Byrne		
Date	August 29, 2006	Reg. No.	57,837



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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$) 170.00

### Complete if Known

Application Number	10/575,749
Filing Date	April 12, 2006
First Named Inventor	Germano Emiliani
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	05581-00145-US

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

### FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 20 = _____	x _____	= _____				
HP = highest number of total claims paid for, if greater than 20.						
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____ - 3 = _____	x _____	= _____				
HP = highest number of independent claims paid for, if greater than 3.						

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	/50	_____ (round up to a whole number) x _____	= _____	

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge):	Surcharge-Late oath or declaration	130.00
	Recordation of Assignment	40.00

#### SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	57,837	Telephone	(302) 658-9141
Name (Print/Type)	Stephanie O'Byrne			Date	August 29, 2006



Docket No.: 05581-00145-US  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Germano Emiliani et al.

Conf. No.: @@@

Application No.: 10/575,749

Group Art Unit: N/A

Filed: April 12, 2006

Examiner: Not Yet Assigned

For: TRANSPARENT AND COLOURED CAST  
FILM FOR IN MOULD LABELLING  
APPLICATION

**TRANSMITTAL OF MISSING PARTS OF APPLICATION**

MS Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Please find enclosed:

1. A Declaration executed by Sandra Best under MPEP §409.03(d) regarding inventor Carbone;
2. A Combined Declaration/Power of Attorney executed by Emiliani;
3. A Combined Declaration/Power of Attorney executed by Bleriot; and
4. A Combined Declaration/Power of Attorney executed by Crisafulli.

A copy of the Notice of Missing Parts has not yet been received.

~~08/31/2006 GWORDFI 00000037 032775 10575749~~

~~01 FC:1051 130.00 DA~~

09/05/2006 GFREY1 00000119 032775 10575749

01 FC:1617 130.00 DA

Application No.: 10/575,749

Docket No.: 05581-00145-US

Please charge our Deposit Account No. 03-2775 in the amount of \$130.00 covering the fee set forth in 37 CFR 1.16(f). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 05581-00145-US.

Dated: August 29, 2006

Respectfully submitted,

By   
Stephanie O'Byrne

Registration No.: 57,837  
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Attorney for Applicant



Application No. (if known): 10/575,749

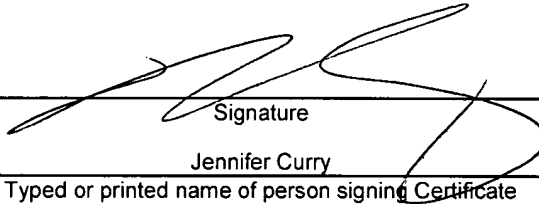
Attorney Docket No.: 05581-00145-US

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 686920897 in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on August 29, 2006  
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Registration Number, if applicable

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Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Form (1 page)  
Fee Transmittal (1 page)  
Transmittal of Missing Parts (2 pages)  
Declaration executed by Best under MPEP §409.03(d) regarding inventor  
Carbone w/ Exhibits (19 pages)  
Combined Declaration/POA of Emiliani (3 pages)  
Combined Declaration/POA of Bleriot (3 pages)  
Combined Declaration/POA of Crisafulli (3 pages)  
Recordation with Assignment (7 pages)  
Copy of International Application (28 pages)  
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